

Mobile Trailers & Buildings

	YES	N/A	LOI OBSERVED
1.	<input type="checkbox"/>	<input type="checkbox"/>	Equipment Declaration submitted to STR. (Subcontractors)
2.	<input type="checkbox"/>	<input type="checkbox"/>	Underground commodities, excavation limits, and buffer zones are identified on the excavation field map, and painted/marked out on the ground?
3.	<input type="checkbox"/>	<input type="checkbox"/>	Are all building utilities identified and disconnected and/or properly isolated?
4.	<input type="checkbox"/>	<input type="checkbox"/>	Trailer or portable building is in transportable condition (e.g.; Sound structure, Sturdy flooring, Roadworthy tires, Interior furnishings secure, Proper placards etc.)?
5.	<input type="checkbox"/>	<input type="checkbox"/>	Work site has been evaluated for potential confined space hazard locations by a competent person?
6.	<input type="checkbox"/>	<input type="checkbox"/>	Proximity hazards (e.g.; overhead electrical lines) have been identified and proper controls are established?
7.	<input type="checkbox"/>	<input type="checkbox"/>	Personnel are aware that pests such as wasps, yellow jackets, and ants may be present?
8.	<input type="checkbox"/>	<input type="checkbox"/>	Tools and equipment are in good condition and used in accordance with manufacturer guidelines and their intended purpose?
9.	<input type="checkbox"/>	<input type="checkbox"/>	Are proper tools, equipment, and safety precautions being utilized for JACKING OPERATIONS?
10.	<input type="checkbox"/>	<input type="checkbox"/>	Is all necessary personal protective equipment provided whenever the use of portable equipment, hand and power tools could create falling, flying or splashing debris, or harmful dusts, fumes, mists, vapors, or gases?
11.	<input type="checkbox"/>	<input type="checkbox"/>	Personnel exposed to fall hazards are trained by a competent person familiar with Fall Protection methods, systems, equipment, and equipment use instructions?
12.	<input type="checkbox"/>	<input type="checkbox"/>	Are barricades or appropriate warning devices installed (e.g: high visibility flagging) while personnel are working on roofs?
13.	<input type="checkbox"/>	<input type="checkbox"/>	Documented record of training certification available for employees using fall protection?
14.	<input type="checkbox"/>	<input type="checkbox"/>	Are employees properly using extension and step ladders (e.g.; Inspected prior to use, Set up properly, Secure and stable, etc.)?
15.	<input type="checkbox"/>	<input type="checkbox"/>	Personnel are using "Three Points of Contact" when utilizing ladders?
16.	<input type="checkbox"/>	<input type="checkbox"/>	Are applicable Hot Work Permits completed and a copy at the work area?
17.	<input type="checkbox"/>	<input type="checkbox"/>	Is the Project work area clean & free of excess trash & debris?
18.	<input type="checkbox"/>	<input type="checkbox"/>	Loaded building or structure is properly secured prior to transport?
19.	<input type="checkbox"/>	<input type="checkbox"/>	Written confirmation of driver/operator qualification is available?
20.	<input type="checkbox"/>	<input type="checkbox"/>	Transport escorts provided when required?

Comments:

Contractor: _____

P.O. Number: _____

Area/Location: _____

Project No: _____

Print Name_____
Signature_____
Date